CITY OF ALMA MUNICIPAL COURT

104 Interurban Rd., Alma, TX 75119 Office: 469-456-0403 www.cityofalmatx.gov

email: courtclerk@cityofalmatx.gov

PAYMENT PLAN REQUEST FORM

| THE STATE OF TEXAS | IN THE ALMA MUNICIPAL COURT |
|--|---|
| VS | CITY OF ALMA |
| | COUNTY OF ELLIS |
| | |
| | REQUIREMENTS: |
| • | y the defendant and returned to the court via mail, or email ent to have the cases set on a payment plan. |
| • First payment is \$75.0 | 00 |
| A minimum of \$50.00 |) is due every two weeks |
| A payment must be n | nade every two weeks failure to do so will result in possible |
| additional fees and or a warr | ant for your arrest. |
| An additional \$25 fee | e will be assessed to each citation if the total balance due is |
| not paid off within 60 days o | f the first payment made. |
| Citation # | |
| Driver's license # | |

Pay online at www.trafficpayment.com or by phone 800-444-1187

DATE

DEFENDANT'S SIGNATURE

I hereby enter a plea of NO CONTEST and waive my right to trial by judge, jury, discovery and forfeit the options of driving safety course and deferred disposition.